

COMPREHENSIVE PLANNING GRANT APPLICATION*

See Program Statement for Program Description, Submittal Information and Scoring Criteria.

#G203059

A. MUNICIPAL INFORMATION

Name of Municipality: _____

Contact Name and Information:

Name and Title: _____

Mailing Address: _____

Tel. no.: _____ Fax no.: _____ Email: _____

Name of Municipal Official Authorized to enter into Contracts on behalf of the Municipality:

Name and Title: _____

Mailing Address: _____

Tel. no.: _____ Fax no.: _____ Email: _____

B. REQUESTED GRANT AMOUNT

State Share: \$ _____

Local Share: \$ _____

To determine the maximum state grant share for your community, please contact your Regional Council.
The local match must be at least 33% of the state grant.

C. AUTHORIZATION TO ENTER INTO A CONTRACT

- ☐ The municipality has authorization to enter into a contract with the State Planning Office for this grant, or “will” have such authorization by June 30, 2003.

D. MUNICIPAL COMMITMENT TO PROVIDE LOCAL DOLLAR MATCH

Check which of the following applies. Awards will be withdrawn if the local commitment is not secured by June 30, 2003.

- ☐ Funds have already been committed for this purpose (attach warrant article or statement signed by an authorized municipal official); or
- ☐ Funds “will” be committed on or before June 30, 2003.

Explain: _____

* *Note: It is not necessary to use this form. If it is more convenient to prepare the application on a personal computer, please feel free to do so answering each question below. All applications must be signed in Section H.*

E. PRELIMINARY ASSESSMENT

Please attach. See Comprehensive Planning Grant Program Statement.

F. BUDGET AND WORKPLAN

See Comprehensive Planning Grant Program Statement. Either complete the table below, or attach a separate workplan/budget document that includes the basic components of this table.

<i>ACTIVITY</i>	<i>ESTIMATED TOTAL BUDGET</i>	<i>TARGET COMPLETION DATE</i>	<i>COMMENT/EXPLANATION</i>
Work Plan/Preliminary Assessment	\$		
Preliminary Draft Inventory/Analysis	\$		
Preliminary Draft Policies	\$		
Preliminary Draft Strategies	\$		
Draft proposed Land Use Plan (including designation of growth and rural areas)	\$		
Draft Comprehensive Plan	XXXXXXXX		
Public Participation	\$	XXXXXXXXXX	
Mapping	\$		
Plan Revisions	\$		
Plan Printing	\$		
Local Administration	\$	XXXXXXXXXX	
Capital Equipment	\$	XXXXXXXXXX	
Other Local Costs	\$	XXXXXXXXXX	
State Share \$		XXXXXXXXXX	
Local Share \$		XXXXXXXXXX	
Total			

As part of the Budget and Workplan also attach a description of (1) how the minimum local match requirement will be met and additional leveraging in the form of cash or in-kind services will be provided and (2) your municipality's anticipated approach for obtaining professional assistance in order to complete the plan in a timely and professional manner (See Comprehensive Planning Grant Program Statement).

G. PLAN FOR PUBLIC PARTICIPATION

Please attach. See Comprehensive Planning Grant Program Statement.

H. CERTIFICATION

I, the undersigned, certify that, to the best of my knowledge, the information contained in and attached to this application is true and correct and authorize its submittal on behalf of the municipality.

Signature of Municipal Official authorized
to enter into contracts on behalf of the Municipality

Date